

FIRST 5 CALIFORNIA SPECIAL NEEDS PROJECT Demonstration Sites RFA Questions & Answers

Glossary

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- AB 99 Identifier: A standard set of information, defined by the state of California that identifies the participant within the Proposition 10 Evaluation Data System application. The required elements include the birth name, birth date, birthplace, mother's first name, and gender as stated on the birth certificate.
- ADA: Americans with Disabilities Act
- CCFC: California Children and Families Commission
- CHDP: Child Health and Disability Program
- CIHS: California Institute on Human Services – Sonoma State University
- EPSDT: Early and Periodic Screening, Diagnosis, and Treatment
- HIPAA: Health Insurance Portability and Accountability Act of 1996
- IDEA: Individuals with Disabilities Education Act
- IPFMHI: Infant, Preschool, Family Mental Health Initiative
- KEP: Kindergarten Entry Profile
- MOU: Memorandum of Understanding
- PEDS: Proposition 10 Evaluation Data System
- PFA: Preschool For All
- RFA: Request for Applications
- SNP: Special Needs Project
- SR: School Readiness
- SRI: SRI International – Special Needs Project Evaluator
- TA: Technical Assistance

Application Questions

1. **Assembly: Do all of the required forms go in the attachment section, or should they be inserted in the sections where they are referenced in the narrative instructions. What about the organizational chart and staff biographies - should they go in section 5A-1 or be included as an attachment? Would it be possible for you to provide an assembly sheet that shows exactly where you want each item to go?**
(August 10, 2004)

The Narrative Section should be a complete document with attachments that are referenced throughout the text included at the end, such as organization charts and staff biographies. Attached to the end of this Question and Answer document is the "Special Needs Project RFA Assembly Sheet" (page 16).

2. **Formatting: Do the text formatting instructions on page 10 (12 point, single-spaced) apply to charts and graphs?**
(August 10, 2004)

No, although it is important for the text and format to be reader friendly throughout the application, including charts and graphs.

3. **Implementation Plan: Where in the proposal should we describe our goals and objectives, timeline, and proposed activities? Should our implementation plan include all of the activities that are listed in section V-C on page 26 (such as asset mapping, development of annual action plan, etc.)?**
(August 10, 2004)

For purposes of the application, the Narrative Description and Program Elements documents (Attachments 3A and 3B) are sufficient in addressing your Implementation Plan. If your site has specific ideas and goals for this project, you may share them as part of attachment 3B, Column 6. Selected Demonstration Sites will prepare a formal implementation/action plan with assistance from the Coordination and Training Contractor: California Institute on Human Services, Sonoma State.

4. **Would it be possible to extend the application deadline beyond October 4? The application/proposal requirements are extensive and it's critical to involve community and school providers --- the breadth and range of involvement needed takes more time than usual to coordinate and manage, August is also one of the hardest months of the year to access community and school-related personnel; it's the heaviest vacation month of the year plus many schools are closed for part of the month.**
(August 10, 2004)

Although this concern is acknowledged by the State Commission, it is important that the timeline for this project be followed to ensure that Demonstration Sites will be

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operating by January 2005. The final application deadline has already been extended from its original deadline, which was set for summer. It is anticipated that the month of September will provide opportunities for County Commissions to coordinate with local partners. Furthermore, the terms of contracts for the Coordination and Training Contractor and the Program Evaluation coincide with this start date.

New Application Questions (August 24 – September 9)

5. **Can you confirm that you want us to insert the ENTIRE narrative description from the School Readiness proposal - it is 25 pages long. Is it correct that it should be inserted as an attachment and not as part of the 25-page narrative? Also, can you provide additional information about which sections to include or how much detail you want in each section? Do we need to include the background description of the community, for example?**
(September 7, 2004)

There are several sections in this RFA where information about the School Readiness Program application narrative is required. Please include an entire, updated School Readiness Program application narrative in Attachment 3A. Please identify the current and new/enhanced strategies in Attachment 3B. In addition, the SNP narrative requests a brief overview of the current School Readiness Program. In the SNP narrative, describe how you are documenting children with disabilities and other special needs, including their specific disabilities or needs. Identify the data collection system you are currently using (Proposition 10 Evaluation Data System – PEDS or other system). The remainder of the narrative requests a description of how the School Readiness Program will be further developed to address the four emphasis areas:

1. Universal access to screening
2. Improved Access to Services
3. Inclusion of Children
4. Infrastructure

Please refer to the attachment at the end of this “RFA Question and Answer” titled “Special Needs Project RFA Assembly Sheet,” which was also included in the first conference call document.

6. **If a School Readiness program in the county is not receiving state matching funds, is it eligible for funding as a SNP Demonstration Site?**
(revised September 9, 2004)

No, although the state commission values additional programs that are funded exclusively at the local level, the Special Needs Project is designed to complement state-funded School Readiness programs. Therefore, it is necessary for selected SNP Demonstration Sites to already be state-funded School Readiness Initiative programs.

Referring to the SNP RFA:

- Section V.1.A (page 24):

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“Only County Children and Families Commissions are eligible to receive funding under this RFA and only existing First 5 California-funded School Readiness Initiative Programs will be considered as possible Demonstration Sites.”

- 7. How much competition do you anticipate for this funding? Do you have a sense of the interest being expressed in this funding by other county commissions, for example, the number of county commissions participating in teleconferences and the number of county commissions continuing to express interest over time?
(September 7, 2004)**

Understanding that this is a subjective question, there has so far been considerable interest from a variety of counties regarding the Special Needs Project. For example, when roll call was taken at the beginning of the first SNP RFA information conference call on August 10, 24 counties were accounted for. However, counties unable to participate in this first call have expressed interest. The selection of SNP demonstration sites is a competitive process; therefore, applicants are encouraged to review and respond to the criteria set forth in the RFA.

- 8. On page 22 of the RFA, question 5a, part 1, does the second question about evidence of administrative support want to know that there is also support for evidence-based practices?
(revised September 9, 2004)**

This criterion for application review concerns “Infrastructure” and is seeking information about administrative support and governance. Specifically, it asks if there is evidence of administrative support for implementation of the SNP demonstration site and for integration of evidence-based practices (possible change from current practice) throughout the system.

- 9. Please provide more information on how Attachment 3A (updated School Readiness narrative) relates to the overall Special Needs Demonstration Project narrative.
(revised September 9, 2004)**

Attachment 3A is an entire, updated version of the School Readiness Program application narrative. Attachment 3B: Program Element Form requests information that relates the SNP (particularly Column 6) to the School Readiness Program. The SNP narrative requests information about the added value of the SNP for the School Readiness Program, particularly addressing the four emphasis areas.

- Please refer to Application Question #5 above.

- 10. In completing Attachment 3B: Program Element Form, please provide more information on how a site should determine which two strategies to highlight if**

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**there are currently more than two in that program element area. Are these only areas that will be expanded upon under the demonstration project?
(revised September 9, 2004)**

The instruction for Attachment 3B, page 13 of the SNP RFA states, "describe the two main strategies your First 5 School Readiness Initiative Program is currently implementing in each of the School Readiness Initiative 5 Essential and Coordinated Elements". In Column 6, the specific programmatic goal to be accomplished in that element area should be listed (e.g. universal access to early and periodic screening). The application narrative (page 39 of the SNP RFA) provides the opportunity to describe how any number or type of "new strategies and partners will be implemented to further address or expand/enhance the 5 Essential and Coordinated Elements" in order to meet the goals of the SNP. It is likely that the new strategies will relate back to the recognized gaps in outreach, identification and service, listed on Attachment 3B, #5

**11. Is it sufficient to include draft MOUs or agreements that have been discussed/drafted by partners and Special Needs Project staff but that have not yet been formally approved by the agency as this can take a significant amount of time and may not be complete before submission of the application?
(September 7, 2004)**

It is important for MOUs with partner agencies to be attached so that applications are appropriately scored based on a program's proposed ability to involve collaborative partners. These documents may be contingent upon funding and may need to address special circumstances (refer to part 2 below).

Refer to the excerpt below:

- o SNP RFA, Section III.A.5.c, parts 1 and 2 (page17):
 - 1) "Using Cover Sheet for Agreements with Collaborative Partners (Attachment 4) identify the partners and strategies already in place (some may be contingent on Special Needs Project funding) to meet the needs (including the cultural and linguistic needs) of the children and families in the School Readiness Initiative's community(ies). This provides a baseline and demonstrates community assets that can be mobilized and focused for the Special Needs Project. Attach MOUs or similar documents specifically describing the relationship, role, and resources from these partners. Provide a summary of these partnerships in the narrative emphasizing the partners' roles in supporting children with special needs and their families and how these partners will specifically support and contribute to the Demonstration Site."
 - 2) "It is highly recommended that MOUs or other agreements be included from the local public early childhood and special education agencies, the local regional center, the local Early Start family resource center, the local Head Start agency, Public Health agency, and Mental Health agency. If you do not have an agreement with one of these relevant agencies, please describe past and current efforts to establish agreements in the narrative. Also

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describe how these types of formal agreements will be developed if the applicant is funded.”

**12. If the lead agency in the proposal already has MOUs in place with the key agencies identified in the RFP (Regional Center, Head Start, CCS, Mental Health, Family Resource) will those MOUs be sufficient, or will additional ones need to be developed?
(September 7, 2004)**

Refer to the excerpt below:

- SNP RFA, Section 2.A.9 (page 11)
“If a MOU or agreement already exists with this partner agency, add a page specific to the Demonstration Site. MOUs or agreements typically contain a scope of work, term of agreement, specific description of services (including quantity/frequency), delineation of responsibilities, work plan and/or timeline, budget and signatures of both parties.”

**13. Because the project includes participation/coordination with the evaluation contractor, what specifically should be included in the application for additional evaluation?
(September 7, 2004)**

Aside from requirements set forth in the SNP RFA, additional evaluation is not necessary of SNP demonstration sites unless a county commission decides to do so on a local level.

Applications should address a willingness to work with on the primary evaluation with SRI, the evaluation contractor.

- Refer to Evaluation Questions #1 and #4 below.
- Refer to the SNP RFA, Section V.D. (pages 28-30), specifically Section V.D.2 (page 30):
“The application must document the willingness of the County Commission and the School Readiness Initiative Program and their collaborative partners to participate fully in the evaluation. To be successful, applicants must:
 - a. Demonstrate a commitment to the importance of accountability for program implementation and achievement of program goals and outcomes through a description of past First 5 and/or School Readiness accountability practices and plans for Special Needs Project accountability practices.
 - b. Include participation in evaluation activities as part of their program description and budget. This is to include a minimum .5 FTE position devoted to evaluation activities. These activities are to include, but not be limited to: participating in PEDS trainings, arranging PEDS trainings for collaborating programs, overseeing data collection in PEDS, reporting PEDS data, providing program documents, and arranging the site visits. Applicants will fund their staff members’ participation in interviews (approximately 5-10 hours per year) and face-to-face program improvement meetings (2 to 4 hours for applicant and collaborative partner’s management members) as

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part of their regular duties. The County Commission must indicate their agreement to devote the necessary resources and to work with the Special Needs Project evaluator to ensure that evaluation efforts to identify effective practices and improve programs are supported.

- c. Possess the following hardware and software (or be willing to acquire it).”
(page 30)

14. Can additional attachments be included (e.g. a graphic representation of the proposed project) or will this be counted toward the 25 maximum narrative pages?

(revised September 9, 2004)

Non-required attachments (for example, a graphic representation of the proposed project) would count as part of the narrative section (25 pages or less recommended). Required attachments and forms, including budget forms, memoranda of understanding, staff biographies, and an organizational chart, are listed in order on the “RFA Assembly Sheet” at the end of this document (page 42).

15. On Attachment 5: Budget Detail form, the fiscal year 7/1/05-6/30/06 is repeated three times. Will you provide a new form or is it okay to make changes?

(revised September 9, 2004)

Thank you for bringing this to our attention. It is recommended that county commissions make appropriate changes to these forms, located on pages 42,43 and 44. The columns should read:

- 12/1/04 – 6/30/05
- 7/1/05 – 6/30/06
- 7/1/06 – 6/30/07
- 7/1/07 – 6/30/08
- 7/1/08 – 11/30/08

16. Regarding questions in the narrative to address about Training and Professional Development – what is expected of the applicant versus what will be provided by the Training/Technical Assistance contractor?

(revised September 9, 2004)

The responsibility for training site staff lies with the local site. The questions in the narrative are asked to establish what currently exists as this project will build on strengths of the local sites and local training opportunities. A professional development plan will be developed with the Training and Technical Assistance contractor (CIHS, Sonoma State University) and some on-site training and technical assistance in selected topics specific to the Special Needs Project will be included and provided through CIHS, Sonoma State University.

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17. Can you provide references to research used to develop the RFA regarding the specific benefits of early intervention for special needs children (ages 0-3)? (September 7, 2004)

The references are primarily listed in the School Readiness Toolkit, "School Readiness for ALL Children: Ensuring that Children with Disabilities or Other Special Needs Are Included in California's School Readiness Efforts" by Brault, Knapp & Winton. It is available at:

<http://www.healthychild.ucla.edu/First5CAReadiness/ChildrenDisabilitiesOtherNeeds.asp>

18. The RFA requests an update on the status of School Readiness Initiative activities. Should the update be inclusive only of the schools/neighborhoods to be involved in the demonstration site or the entire SRI for the county? (revised September 9, 2004)

It is acceptable for an update of the School Readiness Initiative to focus exclusively on the schools/neighborhoods to be involved in the SNP Demonstration Site project. Depending on the size of the program in a given county, this update may involve a rather narrow geographic area or may encompass the entire area of a county. Please indicate which participating School Readiness Program is being referred to.

19. Is this RFA like the School Readiness Initiative--that we can propose a comprehensive program that meets all four emphasis areas through new, enhanced AND existing services (thereby focusing the funds in one or two emphasis areas)? (revised September 9, 2004)

The four SNP emphasis areas are all interconnected and all must be addressed. New, existing and enhanced services would likely be part of the plan. It is logical to assume that funding amounts for each one of these four areas would not need to be the same. However, because of the relationship among these four areas, it is unlikely that any one, although currently adequate, would not be impacted and therefore not need some additional resources. For example, if screening and inclusion were enhanced, it could impact the access to services and the infrastructure. An additional question for the program to ask is, "If we build up (these) services, what additional resources may we need (in other areas)?"

New Application Questions (Asked During September 9 Call)

20. When is the Special Needs Project demonstration site start date? (September 17, 2004)

The Special Needs Project start date is expected to begin January 1, 2005; however, demonstration sites are allowed to start during December 2004 if they are prepared to do so. Demonstration sites can expect to be in contact with the Coordination and

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Training contractor (CIHS, Sonoma State) during December 2004 to arrange meetings and to discuss issues.

**21. Will an application with a narrative that exceeds 25 pages be considered non-responsive?
(September 17, 2004)**

No, the application will not be considered non-responsive. For purposes of this application, the maximum 25 pages recommended for the narrative should suffice in providing the information necessary to describe the project.

**22. On page 16 of the RFA, Section V.A.4, please clarify the statement: “ ... participating as visitation/demonstration programs, mentoring other colleagues or providing training.”
(September 17, 2004)**

This phrase applies to programs that may have participated in other demonstration projects in the past or who have experience in serving as a vehicle for disseminating best practices.

23. Several agencies called me today to ask if the State Commission plans to fund the SNP demonstration sites after the first four years of the project?

The State Commission has approved funding for the Special Needs Project for four years. It is important for selected demonstration sites to demonstrate how their program design addresses the issue of sustainability beyond funding from the State Commission.

- *Refer to RFA, Section III.A.5e .*

Fiscal Questions

- 1. Is it correct that only county commissions are eligible to apply for these funds and not individual programs?
(August 10, 2004)**

Correct, only First 5 County Commissions are eligible to apply for funds from the Special Needs Project.

- *Section V.A.1 – page 24*

“Only County Children and Families Commissions are eligible to receive funding under this RFA and only existing First 5 California-funded School Readiness Initiative Programs will be considered as possible Demonstration Sites.”

- 2. What can be used as matching funds?
(August 10, 2004)**

Refer to the excerpt below:

- *Section V.B.2 – page 25*

“Acceptable sources of the local cash match include County Commission funds, new expenditures by school districts and local public agencies in excess of existing local investments that are specifically targeted to one or more elements of the Special Needs Project, and funds from private sources such as foundations and businesses. In-kind contributions (facilities, supplies, services, and so on) do not count toward the local cash match requirement but are encouraged as a means of improving the sustainability of the Special Needs Project activities.”

- 3. Can you use School Readiness Program money as matching funds?
(August 10, 2004)**

No, School Readiness Program money cannot be used as matching funds.

- *Section V.B.1.d – page 25*

“Local funds used to meet the match requirement for the School Readiness Initiative, Matching Funds for Retention Incentives, Health Access for All Children, Preschool for All, or other First 5 California matching funds programs may not be used as local match for the Special Needs Project Demonstration Site.”

- 4. If you partner with a school district, can you use their Special Education funds for matching funds?
(revised August 24, 2004)**

No, Special Education funds are in place for existing local services. Local matching funds must be new revenues.

Section V.B.1.a – page 25

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“County Commissions and their local partners need to provide at least a 1:1 new cash match for funding their Special Needs Project Demonstration Site to a maximum of \$1 million total state match over four years.”

However, new money, such as a federal grant specific to a project, not from existing mandated funds, could be used.

**5. In order to meet the 1:1 cash match, can we use funds from sources other than the local First 5 funds?
(August 10, 2004)**

Yes, First 5 matching funds can include both County First 5 funds, as well as local partner funds. A local match must be met each of the four years.

- *Section V.B.1.a – page 25*

“County Commissions and their local partners need to provide at least a 1:1 new cash match for funding their Special Needs Project Demonstration Site to a maximum of \$1 million total state match over four years.”

- *Section V.B.1.c – page 25*

“The local cash match commitment must be met each of the four years of funding.”

- *Section V.B.2 – page 25*

“‘Matching funds’ from County Commissions and their local partners may include new funds or funds allocated in the applicable fiscal year that directly support the Special Needs Project Demonstration Site requirements and action plan to achieve the expected outcomes. For example, local First 5 funds currently expended on activities specifically in support of children with disabilities and other special needs in the defined Special Needs Project Demonstration Site community can be used as match with CCFC funds then used to expand any existing commitments/programs that are consistent with the Project and part of the County Commission’s application. Acceptable sources of the local cash match include County Commission funds, new expenditures by school districts and local public agencies in excess of existing local investments that are specifically targeted to one or more elements of the Special Needs Project, and funds from private sources such as foundations and businesses. In-kind contributions (facilities, supplies, services, and so on) do not count toward the local cash match requirement but are encouraged as a means of improving the sustainability of the Special Needs Project activities. State CCFC funds cannot be used to supplant existing local investments.”

**6. Is it anticipated that SNP funds can or will be used for providing the special services that will be needed by those children identified and assessed with a special need?
(August 10, 2004)**

Yes. Funds for the Special Needs Project will be used to provide access to universal screening for all children, birth to age 5, in a catchment area, as well as for services to appropriately include children in typical environments. SNP funds may supplement monies for mandated services that are available from state or federal departments for children identified as having a specific disability if SNP funds provide enhanced

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services beyond mandated services. Not all children, however, qualify for these “early intervention” or “special education” funds, in particular young children with social-emotional or behavioral issues who need services, including pre-referral interventions, assessments and appropriate services (therapy, counseling, behavior modification, coaching, and others). SNP funds may provide for these services for children not eligible for mandated services.

**7. Purpose of funding: is it the First 5 CCFC's intention that this funding be used for direct services?
(August 10, 2004)**

Yes, it is the intention of First 5 CCFC for Special Needs Project funds to be used for direct services at selected Demonstration Sites. Direct services include universal and periodic screenings, pre-referral interventions, assessments, referrals, inclusion practices, and trainings and workforce development. Children not otherwise eligible may receive direct services (refer to Question #6 above under “Fiscal Questions”).

**8. Project-related meetings: I understand that we need to budget for project-related meetings, but it would be helpful to know:
a. How many meetings there will be;
b. How many days the meetings will last;
c. Where the meetings will be held; and
d. How many people should attend from each grantee -- so that we will know how much to budget.
(August 10, 2004)**

- a. There will be one meeting proposed for March 2005, two meetings per fiscal year thereafter (Fall and Spring).
- b. Participants should plan for three days, two nights for meetings. Assuming a noon start and 1 p.m. end those with more travel time needed may need to factor in an additional night.
- c. Meetings will alternate between northern and southern California
- d. Each Demonstration Site should send a representative interdisciplinary and interagency team of between 7-9 people consisting minimally of families, early childhood educators, and health, mental health, early intervention, special education and/or social services providers. The rationale for interdisciplinary teaming is to bring a variety of voices and an array of unique perspectives to focus on the key topics and share experiences across the Sites.
 - While Demonstration Sites will have flexibility in creating their teams, each team must include the Demonstration Site administrator and the identified half-time staff member dedicated to evaluation activities.

Additionally, teams should budget for attendance two other events per year (such as the First 5 Statewide Conference) for dissemination and training starting fiscal year July 2005.

9. Can School Readiness funds that are an overmatch to state funds be used for the Special Needs Project?

- Please refer to page 25 of the SNP RFA.

Section V.B.1.d.

“Local funds used to meet the match requirement for the School Readiness Initiative, Matching Funds for Retention Incentives, Health Access for All Children, Preschool for All, or other First 5 California matching funds programs may not be used as local match for the Special Needs Project Demonstration Site. Furthermore, "over-match" (local funds used as cash match that exceed the program requirements) may not be redirected from other First 5 California matching funds programs unless: (1) an approved budget change request is on file; (2) the School Readiness Initiative program or other program with "over-match" will be implemented as described in the application submitted for that program (program components and level of service); and (3) the redirected "over-match" funds are used specifically to implement the Special Needs Project Demonstration Site requirements and action plan to achieve the expected outcomes.”

**10. Will each county be allocated funds or is this a competitive bid process?
(August 24, 2004)**

Special Needs Project Demonstration Sites will be awarded on a competitive bid process.

- *Section V.A.4.*

“Submission of an application does not guarantee selection for funding.”

New Fiscal Questions (August 24 – September 9)

**11. If the local commission provides a cash match to the application, can these funds be used for facilities? If so, does the specific location of the facility need to be identified in the RFA?
(September 7, 2004)**

The SNP policy on facilities is consistent with the School Readiness Initiative in that it allows use of local match (refer to the excerpt below). However, in scoring applications, careful consideration will be given to appropriateness of funds allocated and resources available to provide the quality services to meet expected outcomes and to participate fully in program evaluation.

- Referencing the School Readiness Initiative (School Readiness Funding Opportunities: Frequently Asked Questions):

<http://www.ccfc.ca.gov/PDF/SRI/SR-FAQ-6-03.pdf>

“Is it acceptable for a county commission to amortize or prorate a capital expenditure such as the cost of a school readiness or preschool facility or land purchase over a 4-year funding period for the School Readiness program? For example, a local partner purchases land for a preschool site and pays the total cost of the land purchase at one time to avoid interest charges.”

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“Yes. Since the First 5 CCFC is unable to fund capital expenditures such as a facility or land purchase, it is acceptable for County Commissions to use capital expenditures as local cash match and to prorate the purchase price of a SR facility or land over the 4-year SR Program period. This policy will assist counties in their efforts to develop facilities for School Readiness Programs and related strategies such as preschool and infant/toddler programs.” (5/20/03)

Counties are allowed to purchase land and facilities if the local First 5 Commission allows it. We would want to know the specific location of the facility.

12. Matching dollars will not be available from the local commission. What are some additional examples of agencies that could provide the match? If another agency is already supporting the operational costs of a School Readiness program, can that be considered part of the match for the SNP? (September 7, 2004)

Refer to Fiscal Question #2 above regarding 1:1 match. Note that it states "matching funds may include new funds or funds allocated in the applicable fiscal year that directly support the Special Needs Demonstration Site requirements".

13. Do all matching funds need to be available up front? (revised September 9, 2004)

The applications must document a guaranteed source of local cash match for all four years (refer to form 5A, page 42 of the SNP RFA). Local cash requirement must be met each year and traceable as cash match in the annual audit.

14. Our county currently is the recipient of one of the Infant Preschool Family Mental Health Initiative grants. That funding goes directly to our county Mental Health office. Can those funds be used as match? If not, since our local commission has added additional dollars to that grant to increase the quality and scope of the activities, can the local commission dollars committed to that grant be used as match for this SNP application? (September 7, 2004)

No, funds used to meet the match requirement of the IPFMHI may not be used as matching funds for a Special Needs Demonstration Site. The SNP RFA does address the process for using overmatch funds as a funding source (page 25 - Section V.B.1.d.)

- Refer also to Fiscal Questions #1, #3, and #8 above.

15. Please clarify what is meant by “equipment and fixed assets” as included on Attachment 5: Budget Detail Form when the RFA also states that “CCFC funds...may not be used for fixed assets or capital expenditures” (p.26, item B.5.)? (revised September 9, 2004)

Thank you for bringing this to our attention. You may use this line for expendable expenditures that cost \$5000 or less. This form represents First 5 CCFC funds only, so there will be no expenditure of CCFC funds for fixed assets or capital expenditures. However, the demonstration sites will later report expenditures of state and local match in all budget categories.

- Refer to: Definition of fixed or capital assets from Fiscal Memorandum No. 01-06
<http://www.ccfc.ca.gov/PDF/Fiscal/FM01-06CapitalImprovements.pdf>
- Refer also to Fiscal Memorandum 01-04
<http://www.ccfc.ca.gov/PDF/Fiscal/FM01-04FixedAssets.pdf>

New Fiscal Questions (Asked During September 9 Call)

**16. If matching funds include a grant that is citywide, how can it be counted toward the catchment area of a Special Needs Project demonstration site?
(September 17, 2004)**

The grant can be applied to the SNP demonstration site by prorating it based on the population of children birth to age five in the school catchment area in relation to the population in the catchment area that the Special Needs Project is intended to serve.

**17. Can new special education facility dollars be used in a designated catchment area?
(September 17, 2004)**

Fiscal Question #11 addresses the use of funds for facilities. The need for, and use of the new facility, should clearly address the needs identified in the Special Needs Project and the four SNP emphasis areas. The definition of acceptable sources of matching funds, which must be a new source, is described in Fiscal Questions #2, #3, #4, and #5

Program Questions

1. **With respect to the Special Needs Project Demonstration Site eligibility, could you define again how to apply the 500-target population?
(August 10, 2004)**

Each Demonstration Site is expected to provide universal access to screening and screen approximately 500 individual children birth to age five in its SR program school(s) catchment area using a periodicity schedule for screening to be provided by First 5 CCFC. Furthermore, the Demonstration Site is expected to provide enhanced services and supports (directly or through formal agreements with partners) for each child identified as needing pre-referral intervention or further assessment through the screening process or identified as having a special need through other means (e.g., child is currently served through IDEA or county mental health).

- *Section I.D.1. – page 5*

“Child: An increased number of children receive effective comprehensive early and periodic screenings conducted with age appropriate and culturally/ linguistically appropriate tools and children’s special needs will be identified at an earlier age. Children receive appropriate pre-referral intervention or referrals and follow up for further interdisciplinary assessment or services. It is anticipated that beginning in the first full fiscal year of the project (July 2005-June 2006) 500 children will be screened at each Demonstration Site annually.”

- *Section 2.A.2.d. – page 14*

“Please describe how you will achieve the numbers required for participation. If your catchment area would screen more than 500 children per year, describe how you will support the increased number of children who may need services. If your county has a smaller than required number of children available to be screened, you may consider applying as a consortium with one contiguous county. It is anticipated that no more than one consortium application will be selected.

Note: In order to yield compelling data about children and families served by the First 5 Special Needs Project, it is imperative that each Demonstration Site provide early and periodic screening annually for approximately 500 children between the ages of birth to five years. It is anticipated that between 20 and 30 percent of the children screened may warrant referral for further assessment and services. Because funding for this project was determined based on screening approximately 500 children per year, it may not be feasible with the available CCFC and county matching funds to improve access to and utilization of services and supports to a substantially larger number of children.”

2. **Is the initial time for screening (page 20, item #2) from January 2005 to June 2006 to allow them to start screening (and counting kids) prior to July 2005 or did we want to stick with the one-year period? Getting the first 500 between 1/05 and 6/06 is probably a good idea for start up/ramp up.
(August 10, 2004)**

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Yes, in order to facilitate a successful startup, the initial time for screening will be from January 2005 to June 2006.

- o *Section I.D.1. – page 5*

“Child: An increased number of children receive effective comprehensive early and periodic screenings conducted with age appropriate and culturally/linguistically appropriate tools and children’s special needs will be identified at an earlier age. Children receive appropriate pre-referral intervention or referrals and follow up for further interdisciplinary assessment or services. It is anticipated that beginning in the first full fiscal year of the project (July 2005-June 2006) 500 children will be screened at each Demonstration Site annually.”

**3. I have heard two figures for the minimum target population 300 and 500 children. Can you clarify which one will apply.
(August 10, 2004)**

Special Needs Project Demonstration Sites are expected to screen a target population of 500 children annually. Please refer to Question #1 above under the “Program Questions”.

4. Screening of the 500:

- a. **Can the 500 children that we are required to screen each year be of any age in the zero to five-age range?**
- b. **Can the same child be screened in subsequent years or are the 500 children screened each year new children?**

(revised August 24, 2004)

- a. Yes, the children screened should represent the full age range from birth to age five. Demonstration Sites should participate in outreach to ensure all children, birth to age five, in the catchment area are screened annually.
- b. The same child can be screened in subsequent years using a periodicity schedule for screening to be provided by First 5 CCFC. It is expected that 500 individual children at each SNP Demonstration Site will be screened annually and, after June 2006, some of those children will have received screening the previous year.

**5. Please suggest the parameters that would constitute “screening” for the 500 children required to be served by this project.
(August 10, 2004)**

A First 5 Special Needs Project protocol (screening process and tools) will be provided by the Coordination and Training Contractor: California Institute on Human Services, Sonoma State University.

For each catchment area, each year, 500 children between birth and age five will need to be documented as having been:

- Screened by the First 5 Special Needs Project Demonstration Site;

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- Screened by a community agency using a screening process comparable to the First 5 Special Needs Project protocol and the results shared with the First 5 Special Needs Project;
- Previously identified and enrolled in an existing system (early intervention, special education, mental health);

After the first year, the total number remains 500 and includes children previously screened or documented as described above and newborns or children new to the area. This is the periodic screening requirement. For some individual children, there may be a recommendation that they are re-screened more often than once a year, but they are to be counted only once per year toward meeting the approximately 500 children screened.

**6. Please suggest the parameters that would constitute “treatment” for the 75 children required to be served by this project.
(August 10, 2004)**

Following screening or documentation as described in Program Question 5 above, children will be identified for follow-up from the First 5 Special Needs Project Demonstration Site. Follow-up may include:

- Immediate referral to another agency or organization mandated to provide services
- Pre-referral intervention (see Program Question #14)
- Additional assessment by the First 5 Special Needs Project Demonstration Site staff
- Formal coordination with mandated service providers (early intervention, special education, mental health) to ensure individual children’s access to School Readiness Initiative programs and services and enhanced services, as appropriate.

Children receiving these follow-up services will be counted and tracked as “core participants”. The following would constitute children counted as receiving “treatment”:

- Children who are eligible for and receiving mandated services from another agency or organization who receive enhanced services (services beyond those mandated)
- Children receiving pre-referral intervention specific to their needs (not general staff training applicable to many children)
- Children receiving direct, First 5 Special Needs Project Demonstration Site funded services following assessment (in areas such as social-emotional health, behavior)

**7. What screening tools will be used for this Demonstration Site project? Will the Ages and Stages tool be an option?
(revised August 24, 2004)**

A screening protocol, including recommended screening tools, is being established by CIHS, the Coordination and Training Contractor, with feedback from the Special

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Needs Project Input Group and selected Demonstration Sites. The Ages and Stages Tool is likely to be one of the recommended tools and therefore, an option as part of the recommended protocol.

8. How will this project be coordinated with the SR project so that the clients will not be negatively impacted by repeated core client surveys and assessments? (August 10, 2004)

Coordination with the SR program, current SR partners, and other entities serving children with disabilities and other special needs is a crucial activity for which the SNP Demonstration Site staff will be responsible. Interagency planning and role delineation and coordinated care management will be needed. Unnecessary repeated client surveys and assessments are to be avoided.

9. What TA and training will be provided to the sites for consistency of evaluation and screening tools? (August 10, 2004)

The Coordination and Training Contractor, CIHS – Sonoma State, will assign a Project Specialist to each SNP Demonstration Site to ensure that selected tools and processes are being used consistently, that data is appropriately being collected and that project goals are being achieved, including the development of a site training plan and curricula.

An evaluation site liaison from SRI will be assigned to each Demonstration Site and will work with the site administrator and 0.5 FTE evaluation person hired at each Demonstration Site.

10. Do you have preference for this project to be directed to current SR families or all families in the SR catchment area? (August 10, 2004)

All families with children birth to age five in the SR catchment area are eligible for services from and are to be included in a Special Needs Demonstration Site, not just currently enrolled or identified families.

11. Our local commission and county support efforts (with non-matched funding) to identify and treat children with special needs. Can the children and families served by these services be counted toward the service requirements of the matching funds grant? (August 10, 2004)

Yes, if:

1. These children and families being served live within a School Readiness school(s) catchment area;

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2. Are receiving services identified as priorities to this project, including universal early and periodic screening, coordinated services and supports, and inclusion (with appropriate supports) in child care and community programs;
3. The local funds are not used as match for other First 5 CCFC programs; and
4. The funds provide new and/or enhanced services.

12. Service goal one - universal access to screening - suggests that children receive “comprehensive early and periodic screenings...”

- a. **To what degree does increased enrollment of children in insurance programs mandated to provide EPSDT services and enhanced referrals to existing developmental screening and assessment services meet this objective?**
(August 10, 2004)

Increased enrollment of children in insurance programs mandated to provide EPSDT services and enhanced referrals to existing developmental screening and assessment services would only meet this objective if the programs and services used a screening process comparable to the First 5 Special Needs Project protocol and the results are shared with the First 5 Special Needs Project.

- b. **Is it the RFA’s intention that this objective can only be met through increased and enhanced screening resource capacity?**
(August 10, 2004)

While the intention of this RFA is to increase coordination and improve the screening system among multiple agencies throughout the community, it is recognized that some SR Initiative programs and First 5 County Commissions have already engaged in extensive outreach and screening efforts. In those cases, the Application can reflect the existing system, how it addresses universal access to early and periodic screening in the catchment area and how the community will incorporate the First 5 Special Needs Project protocol into their existing system.

13. Has the State Commission endorsed/identified (from page 5) “the limited number of screening tools and processes that have been demonstrated to be appropriate for children of different cultural and linguistic background, particularly dual language learners?”
(August 10, 2004)

With suggestions from the Special Needs Project Input Group, the Coordination and Training Contract staff is working on a protocol to recommend appropriate screening tools for use with a diverse population of children:

- o *Coordination and Training Contract (CIHS)*
“Deliverable b.1: The contractor will provide recommended standards (including periodicity) for the health and developmental screening/assessing of all children, birth to five. Screenings/assessments processes and tools will be

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reviewed to ensure that they are culturally/linguistically appropriate for use with the diverse population of children, including dual language learners, and will address a gamut of domains including physical, social, emotional/behavioral, and cognitive development.”

This protocol will be finalized soon after selection of the Demonstration Sites with appropriate site input.

**14. The RFA requests delivery of “pre-referral intervention” services and support. Please provide a fuller description of what is meant by this term.
(August 10, 2004)**

It is anticipated that some children identified through screening as having special needs will benefit from immediate adjustments and short-term interventions with their family and existing early care and education providers, receiving services and supports from their family, preschool teacher, child care provider or other community member who works directly with the child and family. These pre-referral interventions can begin while making a referral to another agency since there is often a delay in receiving services. Also, some children will benefit from focused attention and strategies and will not need further referral.

Pre-referral interventions may include:

- Training and information of a general nature such as:
 - Information on child development and developmentally appropriate practice strategies for children with increased vulnerabilities and risk factors.
 - Trainings for preschool teachers, childcare providers and others concerning strategies for handling disruptive or difficult behavior.
 - Trainings for parents and family members on how they can best support and reinforce their child’s positive behaviors at home.
- Multi-disciplinary team (including family members) review of interventions being used for children.
 - How to implement and evaluate evidence-based interventions and strategies.
 - Selecting specific short-term interventions for children.
 - Identifying specific issues and trying out selected strategies based on the team recommendation.
- Coaching for parents, teachers, providers, and others concerning how to support a child’s healthy development and behavior.
- Educating early childhood professionals regarding separation of external influences from special needs (such as the difference between a speech delay caused by a disability or other special need and a speech delay as a result of a child’s dual language acquisition process).

15. The schools in our county accept enrollment cross-county rather than from just the neighborhood of the school’s location. Therefore, it can be difficult to assure that services targeting the school’s neighborhood would impact children eventually enrolling to this school, though many neighborhood children do

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**enroll. Given this and the objectives of this RFA, is it still acceptable to name the school neighborhood as the catchment area?
(August 10, 2004)**

It is expected that selected Demonstration Sites will participate in active outreach to the neighborhoods and communities of the participating school(s) and also to other children anticipated to enroll in the school(s) served by the School Readiness Program (e.g., those who have indicated intentions through early enrollment).

**16. To what extent would current School Readiness sites be required to add additional activities to their current special needs screening/assessment activities?
(revised August 24, 2004)**

Some SR programs currently have a more comprehensive screening process than others. It is important for a participating School Readiness program to have appropriate, universal early and periodic screenings available to all children living in the catchment area. It will be necessary for pre-referral intervention activities (see Question 14) to be a considerable investment at a Special Needs Project Demonstration Site. Appropriate screenings, assessments, referrals, follow-up, and services will be expected at each Demonstration Site for children identified as having a disability or other special need. Collaboration with local partners to serve these children and families will be essential to:

- 1) Maximize use of current services
- 2) Provide further assessment in areas such as social-emotional or behavioral health
- 3) Use First 5 funding for appropriate, effective and supplemental services and supports.

**17. Are there any planned connections between the Special Needs Project and Preschool For All?
(revised August 24, 2004)**

The following are examples of connections between PFA and the SNP:

- It is anticipated that earliest Preschool for All Demonstration Projects will serve the same target population as the School Readiness Initiative; therefore, collaboration with Special Needs Project Demonstration Sites is expected.
- Information collected and products developed from the Special Needs Project will be disseminated statewide to ensure that counties receive assistance in adopting evidence-based and promising practices to best serve all young children and their families.
 - Examples of deliverables from the Special Needs Project include training plans and curricula.
- Preschool For All Demonstration Projects will be expected to appropriately serve and include children with disabilities and other special needs in typical preschool classrooms.

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- Investment in workforce development of early childhood professionals will include strategies for successfully working with children with disabilities and other special needs, both prior to and following referrals.
- Evidence of continuous program improvement will be expected, with implementation of standards based on effective strategies.
- The evaluation design of these projects, including some similar questions, will be connected and build upon the School Readiness Initiative.

**18. The RFA specifies that applications will vary in the degree to which they rely on school-based, medically-based or community-based platforms. May we submit an application for a program that addresses all three areas even if we only provide match funds for one?
(August 10, 2004)**

All School Readiness Programs are expected to address the Five Essential and Coordinated Elements. Consequently, applications must address participation in all elements, regardless of the primary platform.

19. The four major emphasis areas delineated in the RFA are:

- A. Universal access to screening**
- B. Improved access to/utilization of services and supports**
- C. Inclusion in child care and other settings with support**
- D. Evaluation**

Will a Demonstration Site be required to address all four, or could a Demonstration Site choose one (A - C) and base the evaluation on that one area?

(August 10, 2004)

The four emphasis areas are interconnected and important for a successful approach to providing young children and their families with appropriate screenings and services; therefore, all emphasis areas must be addressed in an application.

- *Section I.D. – page 4*

“The First 5 California Special Needs Project will focus on four major emphasis areas to achieve specific project outcomes. Each emphasis area has outcomes for children, families, programs and systems. Addressing these areas will be required for the Demonstration Sites.”

20. We understand that a Demonstration Site is defined as the designated school catchment areas of a First 5 School Readiness Initiative Program. Can the Demonstration Site operate out of more than one site within the catchment areas? If yes, must each site be a School Readiness site or could a combination of school, health and community centers within the catchment areas be used?

Although project implementation can take place at a combination of locations, these sites must be connected and coordinated within one system. The SNP Demonstration Site coordinator should have access to all service data for children served in this system as part of the SNP Demonstration Site.

21. School Readiness programs are located at low performing schools. Programs funded from other sources also operate from some SR sites but target a different group of children. Will Demonstration Sites be expected to universally screen all children 0 - 5 in the catchment area, or universally screen all at-risk children?
(August 10, 2004)

All children in the school catchment area are to have access to universal early and periodic screening, followed by appropriate pre-referral interventions, assessments, referrals, and services and supports, when needed. The Demonstration Site is expected to actively outreach to the entire catchment area.

22. What is First 5 California's definition of children with special needs for the purposes of this grant? Will it include children with mild to moderate delays? How are you defining children who are "at-risk"?
(August 10, 2004)

Yes, children with mild to moderate delays are included. For purposes of this project, at-risk children comprise a broad group, including children who are affected by more than environmental risk factors. Refer to the RFA:

1. Section I.C. – page 4

“The target population is children birth to five years of age who live in communities served by the School Readiness Initiative and who are: 1) protected by the Americans with Disabilities Act (ADA); or 2) have or are at risk for a chronic physical, developmental, behavioral, or emotional condition and who require developmental, health, mental health, and related services and/or supports of a type or amount beyond that usually required.”

“Families whose children are eligible for mandated services such as the Individuals with Disabilities Education Act (IDEA) or California Children’s Services (CCS) will benefit from early identification, mandated services, and First 5 California supplemental and community-wide services offered at selected project sites. Families whose children are not eligible for mandated services but who require other services, especially for social/emotional and behavioral issues, may receive services initially funded largely by First 5 California at specific Special Needs Project Sites.”

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**23. In the introduction it states that Demonstration Sites are defined as those "that are implementing project goals delineated in this application." Does this mean the State will only fund counties with existing special needs programs?
(August 10, 2004)**

No, the definition referred to in the RFA of a Special Needs Project Demonstration Site is to be used after Demonstration Sites are awarded in December 2004.

○ *Section I. – page 3*

"The purpose of this Request for Applications (RFA) is to identify approximately ten existing First 5 School Readiness Initiative Programs to serve as First 5 California Special Needs Project Demonstration Sites. A Special Needs Demonstration Site is defined as the designated school catchment areas of a First 5 School Readiness Initiative Program that are implementing project goals delineated in this application."

**24. Is the selection of Demonstration Sites limited to ten?
(August 24, 2004)**

The number of sites selected depends on the resources that are available and the amount that each site requests in state match. A total of approximately ten Demonstration Sites will be selected (could be slightly less or slightly more).

**25. Can counties not selected for a Demonstration Site still buy in to Technical Assistance?
(August 24, 2004)**

No, during the first year the Coordination and Training Contractor will focus on the start-up of selected Demonstration Sites. This proposal may be reconsidered after that time. Training and resources will be made available starting in 2005 from CIHS, including the dissemination of best practices and regional trainings for programs not participating as a Special Needs Project Demonstration Site.

**26. Can you explain what is meant by the assurances on page 18 of the Special Needs Project RFA PowerPoint?
(August 24, 2004)**

- Please refer to pages 26 and 27 of the SNP RFA.
Section V.C – Collaboration with Coordination and Training Contract Staff
- Please refer to Attachment 1 of the SNP RFA.
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 - *Part II: Agreements, Assurances and Certifications*

**27. Can multiple School Readiness programs in one county apply as a consortium?
(August 24, 2004)**

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It will be important for selected Special Needs Project Demonstration Sites to build upon and “add to” the existing School Readiness program. Therefore, if existing systems and strategies are different among School Readiness programs being considered for a consortium, it may be difficult for the strategies implemented through the Special Needs Project to be evaluated and to effectively and equally contribute to each of the School Readiness programs. Multiple programs might also have more than 500 children in their catchment area, requiring additional local funds and resources to implement the services (see Program Question #1). Counties should consider how effectively this type of application would meet the scoring criteria.

**28. Will this project serve children identified and served under IDEA?
(August 24, 2004)**

Yes, according to the definition of children to be served, children with identified disabilities (who are protected by ADA and/or IDEA) will be served by selected Demonstration Sites.

- Please refer to Program Question #22 in the “RFA Question and Answer” document.

**29. Where is the balance between screening all children in a catchment area and improving the coordination of services for children who could be reached with screening, but need support to access treatment?
(August 24, 2004)**

The concept of the Special Needs Project addresses both the issues of universal access to screenings in a catchment area, followed by appropriate services and supports to these children. Through coordination and collaboration with existing service systems, there should be an increase in both children screened and appropriately served through existing systems, First 5 or a combination.

- Please refer to Fiscal Questions #6 and #7 and Program Questions # 6 and #14 in the “RFA Question and Answer” document.

**30. Clarify the catchment area of a School Readiness program. Does this include all children?
(August 24, 2004)**

All children living in the catchment area of a School Readiness Program are eligible for screenings and appropriate services from this project.

- Please refer to Program Questions #10, #15, and #21 in the “RFA Question and Answer” document.

31. Concerning the screening tool to be used:

- a. Amount of time to administer per child?
- b. How often will screening tool be administered?
- c. Staff qualifications for individuals administering the screening tool?

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- d. **Will there be separate tools for the screening of special needs and the screening of mental health concerns?**
- e. **Can a county use its own existing screening tool?**

(August 24, 2004)

- a. It is anticipated that the selected screening tool can be administered in a reasonable length of time for each child.
- b. It is anticipated that the periodicity schedule for screening will not exceed the schedule of that used by CHDP.
- c. It is expected that the initial screening tool could be administered by a variety of individuals, including trained paraprofessionals, health care providers and early childhood educators. Further screenings and assessments will likely require more qualified or trained staff, especially for working with children with behavioral or mental health issues.
- d. CIHS anticipates combining screening tools and processes to cover all developmental areas (physical, social emotional, cognitive, language). Further mental health screening may actually be a second level screen for a smaller group based on the protocol.
- e. In order to yield reliable data, it is important for the screening tool(s) used at each of the Demonstration Sites to be compatible with the recommended screening protocol. Input from counties with existing screening tools has been requested and is welcome.

32. Will children served by this project, who receive services from the school district, Regional Center or other agency be required to have these services followed? How will HIPAA laws be addressed?

(August 24, 2004)

Yes, in order to ensure sufficient data, all additional services that a child identified by this project receives need to be documented and, to some degree, followed by the Demonstration Site. How children receiving services in other systems are followed within the SR Initiative Demonstration Sites will be determined as part of the initial interagency work facilitated by the CIHS-SSU Coordination and Training Contractor in collaboration with SRI international, the project evaluator. Also, Technical Assistance will be available to Sites to ensure that HIPAA laws are complied with.

33. Program Question #17 on the original “RFA Question and Answer” document for the Special Needs Project states that it is anticipated that earliest PFA Demo Projects will serve the same target population as the School Readiness Initiative. Could you please elaborate?

(August 24, 2004)

We want to connect First 5 initiatives, projects and programs whenever possible to maximize impact (i.e., results). We recognize that there are various ways to reach that goal. The PFA Planning Projects 'Threshold Criteria' included two criteria that are meant to be complementary:

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- i. Criterion #3: Agree to Criteria included in the PFA Demonstration Projects 'Expended Criteria' document, including connection with SR Programs and the CRI Program and participation in statewide evaluation
- ii. Criterion #4: Focus on developing PFA in underserved and priority communities as part of the 'system' of PFA Projects.

We want to ensure that we are all working to decrease the achievement gap by focusing on underserved and high priority (low API) communities AND by connecting children/families with the comprehensive services provided by SR Programs and supported by research.

New Program Questions (August 24 – September 9)

34. Regarding the approximate target population of 500 children to be screened:

- a. I'm still having trouble with the target number of 500, in trying to reconcile it with the requirement for universal screening. If taken literally, these two requirements would suggest that only project areas with a certain population size would be funded - everyone else would be too small to reach the 500 requirement, or too big to achieve universality.
- b. Can you estimate the actual population size that we should be reaching out to in order to ensure that at least 500 children are permitted by parental consent to participate in this project and to have data collected?
- c. Do the 500 children need to be drawn from children currently participating in the School Readiness program activities?

(revised September 9, 2004)

- a. Children, birth to age five, living in the school catchment area(s) of what the county commission has defined as their School Readiness catchment area, are to have access to universal screening. Approximately 500 children need to be screened on an annual basis. It is likely that not every child, birth to age five, living in a School Readiness catchment area will participate in this screening, but the Demonstration Site has the responsibility for active and intensive outreach to children and their families living in this school catchment area(s). If the school catchment area(s) is significantly larger than 500, an application will need to demonstrate how additional funds will be available to serve the anticipated larger number of children identified as needing additional pre-referral interventions, referrals, assessments, and appropriate services.
- b. The RFA requests that approximately 500 children be screened each year. Applications are to identify a School Readiness catchment area that includes a sufficient number of children, birth to age five to accomplish this objective. Applications will be scored based on their demonstrated ability to reach out to this target population for purposes of early, periodic screening of approximately 500 children.
- c. No, the 500 children do not have to be currently participating in the School Readiness activities. It is expected that children served by the School Readiness Program will be included in the Special Needs Project and that, potentially, additional children in the School Readiness Program catchment area will also be served.

Further information regarding the school catchment area(s) and screening of children is available in Program questions #1 - #5 above.

35. Regarding an application design proposing a consortium of School Readiness programs in one county:

- a. We are looking at developing a proposal that would target two SR schools (in a single district) that border each other and share several of the same community resources. Would that design be considered? We felt that by using the two schools we would be sure to have the desired numbers for screening and service, and evaluation.
- b. Four schools in a district with 12 elementary schools make up the current School Readiness programs. The district has a liberal intra-district transfer policy. Does the catchment area for the Special Needs Project include the boundaries of the district as a whole?

(September 7, 2004)

- a. Yes, multiple schools can be included in one proposal. Please list the schools in Attachment 2 – “Participating Schools Form” (page 38 of the RFA). Additionally, if these schools are not in the same School Readiness program, please refer to Program Question #27 above.
- b. The school catchment area(s) of a Special Needs demonstration site is the catchment area of one or more schools in the original School Readiness program; in this case the four schools. Furthermore, refer to Program Question #15 above.

36. According to the answers on the first conference call, the School Readiness catchment areas seem to be the district boundaries for a School Readiness contract currently in place. Are there any circumstances you have evaluated that are different from that interpretation?

(September 7, 2004)

It is correct that the existing School Readiness catchment area will be the catchment area for a Special Needs demonstration site.

- o For additional circumstances, refer to Program Questions #10, #15, #20, #27, #30, and #35 above.

37. We are planning to reach children through clinics and pediatricians’ offices.

However, in some of our communities these offices will serve children from outside our catchment areas, as well as the children who are in our target population. Rather than refusing to screen these children, is it acceptable for staff paid through the Special Needs Project to also screen and refer children who are not in the catchment area?

(revised September 9, 2004)

The funds allocated for the Special Needs demonstration sites, including the local match, are intended for a defined catchment area. Furthermore, all First 5 funds must be used only for eligible children (birth to age five) and their families. Coordinating

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screening in clinics and pediatricians' offices is highly desirable. However, the circumstances described will most likely require a larger local investment than a 1:1 match with state funds to accomplish the project goals and meet the application scoring criteria, and comply with the use of First 5 funds for children, 0-5.

**38. How are you accommodating childcare & support needs of families required to attend conferences?
(revised September 9, 2004)**

Anticipated costs to support families who attend a conference or meeting as part of the Special Needs demonstration site team should be included in the budget for the Demonstration Site. It is the responsibility of the demonstration site to work with the families to meet these support needs.

**39. Does First 5 California expect agencies to have a strategy to improve delivery of services from their partners, for example Early Start and Regional Center?
(September 7, 2004)**

The Special Needs Project starts with a foundation of important concepts, including continually evaluating and improving Project work, thereby committing to continuous improvement for the Project participants, Demonstration sites, and communities. The Collaborative Partners are part of the service delivery system, and will be included in the action planning for the demonstration site. The MOU's and involvement of these partners from the beginning will allow them to work with First 5 to develop strategies together. Refer to: SNP RFA, Section I.A., "Special Needs Project Overview" (page 3).

**40. When children are referred to services, will those service providers be required to input data into the data collection system (e.g., intensity of service, assessment results, goals, progress, etc) or do you expect that the .5 FTE data person will be able to do all the data input?
(revised September 9, 2004)**

This is a program design question. Counties should assess the evaluation needs in relation to their proposed program design, structure, staffing, etc. to determine how they can most effectively and efficiently collect and enter the service and evaluation data. This will most likely vary from site to site. We have estimated, at the minimum, that SNP demonstration sites will need a .5 FTE person to coordinate the data collection. However, that does assume some data input by service providers.

**New Program Questions Regarding the Screening Tool
(August 24 – September 9):**

The Special Needs Project links screening to services, programs and interventions. While screening is a critical piece of the work at the demonstration sites, think of staffing in a more holistic way with

interagency collaborations and people who could both screen and participate in providing other services to children and families.

41. When writing this application we would like to have the screening tool for the preschool be Desired Results. Is that going to be a problem to write that in the application?

(revised September 9, 2004)

For the Special Needs Project, we need a screening procedure to indicate whether a child needs to go on for further assessment. Desired Results Developmental Profile (DRDP) is not designed for use as a screening tool. CIHS, the Coordination and Training Contractor, will provide a screening protocol for demonstration sites to use in their selection of screening tools.

“The primary objective of the Desired Results approach is to encourage progress toward the achievement of desired results by providing information and technical assistance to improve program quality. The system has been built on existing processes and procedures, with an emphasis on the coordination of programs and services to support the continuum of children's developmental progress from birth to 13 years of age.”

- DRDP was not designed as a screening tool. It is used to follow individual children by providing a “snapshot” of a child, and to show developmental progress. Also, the DRDP is not used for retention of individual children.
- Although a screening instrument may rely on the same kinds of items as the DRDP, it would be necessary to develop a shorter form with fewer items. It would also be necessary do additional studies to ensure that the instrument has the right psychometric properties to be used as a screening tool.
- To develop a version of DRDP for screening purposes, a long-term (over five years) study would be needed.

Furthermore, the Modified Desired Results Developmental Profile (MDRDP) provides a broad programmatic look at a cohort of children. Individual child screening is not the intended use of this tool. As stated in the Memorandum of Understanding between the county commission and the state commission regarding use of the MDRDP, “It is important to stress that the aggregated data from the MDRDP should only be used as a profile/snapshot of where the cohorts of children are on the Desired Results developmental continuum and to identify changes, over time, in cohorts of entering kindergartners. It is also important to stress that the MDRDP cannot be used as a diagnostic or predictive tool for individual children, as a measure of an individual child's school readiness and most importantly, the MDRDP is not intended to substitute for a comprehensive developmental or educational assessment that may be needed for some children.”

CDE's contractor for Desired Results:

http://www.sonoma.edu/cihs/desiredresults/training/project_description.htm

Also refer to Program Questions #5, #7, #13, and #31 above.

42. Regarding the screening tool:

- a. If education has evaluated a child and determined the scores were not low enough for eligibility under IDEA but there were areas of deficit, delay, concern, can the psychological evaluation test results be used so that the child does not have to be evaluated again? Will the child qualify as having a special need?
- b. If Regional Centers, Education, and other county screening programs conduct screenings, are they included in the required 500 screenings required by the Special Needs Project?
- c. What are the professional requirements for the staff conducting the screenings?
- d. Will all children in the School Readiness program be required to be screened?
- e. What is the periodicity being considered for the screening tool?
(revised September 9, 2004)

- a. Yes, if these agencies or professionals are evaluating children who live in a School Readiness catchment area and if the results of the evaluation can be shared with the demonstration program site. They may qualify as "having a special need" but would qualify as a core participant in the demonstration site and be eligible for enhanced services as needed. It is expected that many children served by the Special Needs Project demonstration site will not qualify for services under IDEA. Refer also to Program Question #22 above.
- b. Yes, if these agencies or professionals are screening children who live in a School Readiness catchment area with tools that are compatible with the SNP's screening protocol, (which is being developed by CIHS) and the information from the screenings are shared with the demonstration site.
- c. Refer to Program Question #31.c. above.
- d. Refer to Program Question #21 above.
- e. Knowing that very young children need more frequent screening in order to adequately catch developmental problems, the periodicity will be more frequent for younger children, however screening of infants generally is less time intensive. While the screening protocol is still under development, the likely periodicity schedule is as follows:
 - o For children under two years of age, screening would happen at least every six months and possibly every four months.
 - o For children between two and three years, every six months is most likely.
 - o For children age three and up every year will be adequate unless earlier screening indicates a need for closer follow-up.
 Refer also to Program Question #31.b. above.

**43. As children are identified and referred to services, what data will be required to be captured regarding the services the child/families receive? If the child is further referred, do the data reporting requirements still apply?
(September 7, 2004)**

An important aspect of this project is to better understand the range of supports and services that are needed to effectively address the needs of children with disabilities

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and other special needs and their families. For that reason, we will be asking that sites enter into the PEDS Special Needs Project Module the specific services being provided by other agencies, the personnel delivering the service, and the general outcomes or goals of the intervention. Children who are identified as needing further assessment following the initial screening will become core participants for tracking purposes and all subsequent service data, from First 5 funded programs or other agencies, will be collected and reported.

**44. If we use data from existing screening tools used by partner agencies to count toward the 500, what type/extent of data will need to be documented and shared from existing or new screening tools used by project partners?
(September 7, 2004)**

The data will include results of the screening, including scores from tools and pertinent information about the recommended next steps.

- Refer also to Program Question #42 above.

**45. Do the 500 children to be screened need to be assessed in all areas, for example: vision, speech, hearing, etc? How does the State Commission define special needs?
(September 7, 2004)**

Screening is a check to identify children who need intervention and/or further assessment/evaluation to determine whether they may have disabilities or other special needs. Screening for this project will include information in the following areas:

- Physical/motor (large and fine motor)
- General Health (including vision and hearing)
- Cognitive (thinking and learning)
- Communication (expressive and receptive)
- Social/Emotional (behavioral and relationships)

Information will be gathered by observation data, parent reports and use of screening tools.

- Refer also to the definition of special needs in Program Question #22 above.

**46. Will there be public input/review process of the universal screening tool by local providers (of all types)?
(September 7, 2004)**

There is not a single tool, but a process/protocol being developing using existing commercially available tools. The screening protocol and process are being developed by a workgroup with review and input from experts in the area of screening and assessment. The protocol will be piloted in the demonstration sites, and local providers of all types will have an opportunity to provide input on the protocol. Following an initial period of use within the demonstration sites and completion of modifications as recommended, the protocol will be shared with the First 5 California funded School Readiness Initiative Programs.

**47. What is the process by which a screening tool will be deemed as "comparable" and who will make the decision?
(September 7, 2004)**

As stated in Program Questions #5 and #12b, the screening process (not tool) must be comparable to the First 5 Special Needs Project protocol and the results shared with the First 5 Special Needs Project. CIHS staff and consultants working with demonstration site staff during the initial phase of the demonstration site implementation will make the decision about comparability.

**48. Will the screening protocol discussed in Program Question #7 of the first call include preliminary screening instruments for universal screening as well as assessment instruments for further testing?
(September 7, 2004)**

The focus of the screening protocol will be on initial screening of children's overall development with information on next steps, including referral for further assessment. In most cases, assessment will be done by Regional Centers, school districts, and other organizations with staff trained in pediatric assessment. Demonstration sites will be supported and encouraged to have close relationships with these local agencies in order to make the process as smooth and successful as possible for families. It is possible that assessment for social-emotional and behavioral health may need to be done by the demonstration site if there are not adequate early childhood specialists available through the local mental health resources. Since support and services for children with challenges in the area of social-emotional and behavioral health are anticipated to be available as part of each demonstration site, hiring personnel with expertise in this area or developing a formal relationship with an agency who can provide this expertise is recommended.

**49. Will there be mandated instruments, or only suggestions and recommendations? We need to know what the instruments are because it will have an impact on the level of staff we need to budget for, and on the time required for each assessment. We would like to continue using the Ages and Stages Questionnaire that we have adopted as the standard for our county.
(September 7, 2004)**

The protocol will mandate a process that will most likely include a combination of tools to ensure consistency across the demonstration sites. Ages and Stages will most likely be one of the tools, but may need to be supplemented with additional tools to adequately cover the full range of developmental areas for screening (refer to Program Question #45 above).

**50. Can the initial screening be conducted by parents, as is the standard for the Ages and Stages Questionnaire?
(September 7, 2004)**

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Parents will be an integral part of the screening process and, in the case of tools designed for use by parents, can conduct the screening on that tool. The process will require some additional interview questions with the family and may require a brief observation of the child.

51. We have an Infant Mental Health Collaboration that has been meeting for about a year, and they wanted to develop a screening instrument and provide universal screenings. When we told them about the allocation and that a screening tool was being developed, they were very excited. The question they have is about the screening tool. Does the screening tool assess the following three factors?

- 1. Family Risk Factors**
- 2. Care Giver Child Relationships**
- 3. Child Behavior**

(September 7, 2004)

There is not a single tool, but a process/protocol being developing using existing commercially available tools. The screening protocol will address the three issues listed above from a screening perspective.

- Refer to Program Question #48 above for more information on how the needs of children with social-emotional, behavioral health issues can be addressed.

52. Will reporting of screening/referral results be supported by technology, for example optical screening, to ease data entry burdens?
(revised September 9, 2004)

Screening and referral results will be collected with the Proposition 10 Evaluation data system (PEDS). It is not currently possible to enter data into PEDS with optical scanning equipment. It is anticipated that data entry for screening and referral will require only a few minutes per child.

53. What is the expected time required to enter a screening or referral? Is the expectation that all provider partners will receive access to the reporting system or that they send forms to the data coordinator for entry?
(revised September 9, 2004)

Data entry in PEDS is designed to be simple and efficient. It is anticipated that data entry for each portion (e.g., screening results, assessment results, referral and service information) of the PEDS Special Needs Project module will take approximately five minutes per child per service contact. Demonstration sites can develop their own arrangements regarding the personnel responsible for entering data into PEDS. Because PEDS is a web-based system, it is possible for many partner agencies to have access to the system, depending on the local arrangement. It is expected that data entry will either be performed by the half-time evaluation staff person at each demonstration site or will be overseen by that individual.

New Program Questions (Asked During September 9 Call)

54. Is Ages and Stages a screening tool or an assessment tool? (September 17, 2004)

The Ages and Stages Questionnaire is designed to be used as a screening tool.

- Refer to the publisher of the Ages and Stages Questionnaires: Paul H. Brookes Publishing Co., Inc.
<http://www.brookespublishing.com/store/books/bricker-asq/index.htm>

“A major obstacle to the timely delivery of early intervention services is the early and accurate identification of infants and young children who have developmental delays or disorders. The first step in obtaining needed services for infants and young children and their families is the establishment of comprehensive first-level screening programs. The goal of comprehensive Child- Find programs is to separate accurately the few infants and young children who require more extensive evaluation from the children who do not. To be useful, first-level screening programs need to assess large numbers of children and, therefore, require screening measures or procedures that are easy to administer, at a low cost, and appropriate for diverse populations. **The Ages & Stages Questionnaires (ASQ): A Parent-Completed, Child-Monitoring System, Second Edition, meets these criteria for a first-level comprehensive screening program** (emphasis added). The ASQ screening system is composed of 19 questionnaires designed to be completed by parents¹ or primary caregivers. Questionnaire intervals include 4, 6, 8, 10, 12, 14, 16, 18, 20, 22, 24, 27, 30, 33, 36, 42, 48, 54, and 60 months of age. In most cases, these questionnaires can identify accurately infants or young children who are in need of further evaluation to determine whether they are eligible for early intervention services.”

55. Regarding the approximately 500 children to be screened:

- a. **Are we to determine our own population target size of a school catchment area to guarantee approximately 500 children are screened each year? Concern still remains regarding the participation rate of parents, rural counties and communities that tend to have a high mobility rate.**
- b. **Has the state commission considered allowing selected demonstration sites modify their catchment area in future years of the project if the requirement for screening approximately 500 children needed is not met?**

(September 17, 2004)

- a. Yes, it is appropriate for each county to determine for themselves the school catchment area(s) in their county that includes an adequate number of children, birth to age five, that would provide for approximately 500 children to be screened each year.
 - SNP RFA Section III.A.2.d (page 14)
“Please describe how you will achieve the numbers required for participation. If your catchment area would screen more than 500 children per year, describe

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how you will support the increased number of children who may require pre-referral intervention or need other services.”

- b. The selection of a school catchment area must be a purposeful decision of each county applying. A Special Needs Project demonstration sites will not be allowed to downsize a site since this would likely exclude children and families who had already received services provided or offered by the site. For a site that encounters difficulty meeting the requirement of screening approximately 500 children each year, First 5 CA will work on an individual basis to address the barriers and possible solutions.*

Evaluation Questions

1. **Can a data collection system, aside from PEDS, be used? What are the specifications for a PEDS-alternative?**

(August 10, 2004)

- a. **Several counties expressed the desire to export their evaluation data from their existing data system into PEDS. Will this approach be permitted?**

(August 24, 2004)

- b. **Are counties using other data collection systems (i.e., OCERS) required to use PEDS, or can the data collection requirements be captured in other systems?**

(August 10, 2004)

First 5 California is committed to doing an in-depth evaluation of the Special Needs Project and Demonstration Sites are required to participate in all components of the evaluation design. It is anticipated that the Site-specific, project-specific data collected will satisfy both state and local evaluation needs for this project. Because the evaluation design does require significant data entry, the RFA includes requirements to budget for at least a 0.5 FTE to oversee and manage the data collection process. For reporting consistency, a very specific PEDS module is being designed that will allow us to collect the demographic and participant level data (services and child/family outcomes) for the Special Needs Project. Because there are such a variety of data systems being used in the counties, we are requiring counties receiving Demonstration Site funding to enter all program data into the new PEDS module. All data and the analysis of the data will be provided to the county commissions for their specific Demonstration Site. The state contracted evaluator can also provide additional types of analysis on the data if needed by the county commission and/or the demonstration site. If a county also wants to enter the data into their own system, the statewide evaluation team can provide some technical assistance to support their efforts, but the primary responsibility would fall to the county.

2. **Why not use active consent forms distributed at schools instead of passive forms as stated in the RFA?**

(revised August 24, 2004)

In the past two years, we have been finding that the use of passive consent for the Kindergarten Entry Profile (KEP) is widely accepted by schools and parents, and yields better participation rates. However, if a school district or county commission has a policy requiring the use of active consent, we can accommodate that policy.

3. **Is this project designed to have longitudinal data?**

(August 24, 2004)

Though this is not its primary design, it is expected that if a range of children are screened throughout the four years (particularly the youngest children receiving repeated screenings in subsequent years), the project will provide some longitudinal

data. Efforts are being made to create an evaluation design that is capable of capturing longitudinal results.

New Evaluation Questions (August 24 – September 9)

4. Could you tell us more about the evaluation design? (September 7, 2004)

The Special Needs Project evaluation will be embedded within, and share major evaluation questions with, the School Readiness Initiative evaluation. The evaluation has three main design features: case studies, quantitative data about participants, and an assessment of the quality of the technical assistance provided by the statewide coordination and training contractor.

- **Case studies:** Each demonstration site will be studied as its own case. The case study will provide a detailed description of the program model, family-centered policies, and local systems and conditions. The case study will serve as the basis for cross-case analysis of promising practices. The case studies will involve semiannual site visits to conduct: interviews with parents and program staff; direct observation of programs and services; and an annual survey of program directors.
- **Quantitative data about participants:** PEDS, the Proposition 10 Evaluation Data System, (a web-based data collection tool), will be used by program staff to enter and report data on activities, services, and participants. A special module for the SNP will be added to PEDS. The SNP PEDS module will be used to: track children from screening, assessment, and referral through placement and service delivery; and collect data on child and family outcomes. KEP data collection for schools participating in the SNP will be included to collect data on child and family outcomes.
- **Technical assistance quality:** SRI will work with the coordination and training contractor internal evaluator to carry out a continuous improvement model and to evaluate the performance of the training and coordination contractor on the project. This will involve collecting/conducting: ratings of training efficacy from individual training events; and an annual survey to assess the overall quality of the technical assistance.

5. Will the demonstration site data collection system require tracking/inputting data on the 500 participants or just the 75 core participants? (September 7, 2004)

Initially, all 500 children will be considered non-core participants with SNP demonstration sites collecting minimal information on every child they screen (demographics and AB 99 information, along with the parent's release for screening). We will then do intensive tracking on those children who screen positive and are referred for further assessment (at this point we will consider them core participants). That number is expected to be around 75 children. With this process, if a child is screened at time 1 and no further assessments are recommended, but a year later s/he is screened again and at that time is in need of further assessment, we will

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have record/results of the earlier screening and service data if they are a core participant receiving services through any other First 5 programs.

The following questions, which were recently submitted, are answered by Evaluation Question #1 above:

- 6. Since there was strong concern on the last call about the mandatory use of PEDS, has there been consideration that PEDS could be made to interconnect with existing county systems?
(September 7, 2004)**
- 7. In reference to Evaluation Question #1 of the RFA Q&A document: If the counties selected for the demonstration sites overwhelmingly use OCERS, why couldn't the state adapt their data collection system to what counties are already doing?
(September 7, 2004)**
- 8. Is the requirement to use PEDS central to the application being successful? We have a system that includes the PEDS data elements in our own outcomes measurement system. As long as we are able to respond to the PEDS data elements, do we have to use that system?
(September 7, 2004)**
 - Refer also to Application Question #1 above.
Refer to Section V.D. (pages 28-30), specifically Section V.D.2 (page 30):
“The application must document the willingness of the County Commission and the School Readiness Initiative Program and their collaborative partners to participate fully in the evaluation ...”

SPECIAL NEEDS PROJECT RFA ASSEMBLY SHEET
(August 10, 2004)

Please clearly label each attachment with title and number.

Attachment 1 – Cover Sheet

Program Description (Narrative)

1. Overview
2. Universal Access to Screening
3. Improved Access to Services
4. Inclusion of Children
5. Infrastructure

Attachment 2 – Participating Schools Form

Attachment 3A – Narrative Description of School Readiness Program

Attachment 3B – Program Element Form

Attachment 4 – Cover Sheet for Agreements with Collaborative Partners

Memoranda of Understanding and Formal Agreements with Collaborative Partners

Attachment 5

- Form 5A – Special Needs Project Demonstration Site Budget Forms
- Form 5B – Special Needs Project Demonstration Site Estimated Program Budget (First 5 CCFC FUNDS Only)
- Form 5C – Demonstration Site Budget Detail – First 5 CCFC Funds

Organizational Chart

Staff Biographies